

AC 4431
P.H. & H.

21-1925.

Wiltshire County Council

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1924.

The Robert Spennell Press, Printers, Church Street, Warwick

P.H. & H.

21-1925.

Wiltshire County Council

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR 1924.

The Robert Spennell Press, Printers, Church Street, Warwick

INDEX.

	PAGES
GENERAL STATISTICS—AREA, POPULATION, ETC.	5
EXTRACTS FROM VITAL STATISTICS—BIRTHS, DEATHS, ETC.	5—6
NOTIFIABLE DISEASES	7—9
TUBERCULOSIS	9—14
OPHTHALMIA NEONATORUM	14
CAUSES OF SICKNESS	15
PROFESSIONAL NURSING IN THE HOME	15
MIDWIFERY SERVICE	15—17
MATERNITY AND CHILD WELFARE	17—19
CLINICS AND TREATMENT CENTRES	19—20
VENEREAL DISEASES	20—21
HOSPITAL ACCOMMODATION	22—24
LABORATORY WORK	24
SEWAGE DISPOSAL AND RIVER POLLUTION	24—29
WATER SUPPLY	29—30
FOOD AND DRUGS ACTS, ETC.	30—31
PUBLIC HEALTH STAFF	31—32
MENTAL DEFICIENCY ACT	32
HOUSING	32—35

WILTS COUNTY COUNCIL.

Annual Report of the County Medical Officer of Health for the Year 1924.

Public Health Department,
County Offices,
Trowbridge,
April, 1925.

MY LORDS, LADIES AND GENTLEMEN,

I have the honour to submit my sixth Annual Report on the Public Health of the County of Wilts.

The report is drawn up in accordance with the Ministry's Circular 540 of December, 1924.

The past year has been one of comparatively uneventful progress, marked by the increasing co-operation of Local Sanitary Authorities in those problems which affect themselves as well as the County Council.

The promotion to important positions elsewhere of Dr. Johnstone and Dr. Bowes, who have both held posts as Assistant Medical Officers for several years, has somewhat interrupted the ordinary routine. The opportunity has been taken of establishing an Assistant at Swindon instead of at Trowbridge, particularly for the purpose of the better performance of tuberculosis and school work in that area.

After six months sick leave Dr. Crossley, County Tuberculosis Officer, returned to work in the summer. The loss of his services during that period was made good by the temporary appointment of Dr. Mackenzie and by a redistribution of duties among the rest of the staff.

Your obedient Servant,

CLAUDE E. TANGYE,

County Medical Officer.



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

<https://archive.org/details/b30391441>

1. GENERAL STATISTICS.

Area (acres) ...	...	...	...	...	...	...	...	...	864,101
Population (1924) ...	...	...	...	...	for births, 306,900	for deaths	...	...	295,100
Number of inhabited houses (1921)	...	...	...	...	...	...	...	...	66,874
Number of families or separate occupiers (1921)	...	...	...	...	...	...	...	...	69,248
Rateable value	...	...	...	...	...	...	...	...	£1,931,283
Assessable Value	...	...	...	...	...	...	...	...	£1,474,254
Sum represented by a penny rate	...	...	...	...	...	...	...	...	£6,142

The estimate of population by the Registrar General shows an increase of 4,220 on that for 1923. The high figure for the birth rate population is accounted for by the presence in the Salisbury Plain area of large forces of the Army and Royal Air Force.

2. EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

					Male.		Female.		Total.		Rate.	
					1923	1924	1923	1924	1923	1924	1923	1924
Births—												
Total	...	...	...	...	2804	2678	2619	2560	5423	5238	18.28	17.07
Legitimate	...	...	...	...	2662	2559	2495	2458	5157	5017	17.38	16.35
Illegitimate	...	...	...	...	142	119	124	102	266	221	0.90	0.72
Deaths	...	...	...	...	1617	1690	1578	1678	3195	3368	10.98	11.41
Deaths of Infants under one year of age												
per 1,000 births—												
Total	...	...	...	...	168	171	111	115	279	286	51.44	54.60
Legitimate	...	...	...	...	156	161	102	110	258	271	47.57	51.74
Illegitimate	...	...	...	...	12	10	9	5	21	15	3.87	2.86

No. of women dying in, or in consequence of, Childbirth—from Sepsis										...	10	(4)
											other causes	...
										...	11	(9)
Deaths from Measles (all ages)										...	11	(9)
,, Whooping Cough (all ages)										...	20	(18)
,, Diarrhoea (under two years of age)										...	12	(14)

(The figures in brackets are those for 1923).

From the particulars given it will be seen that the vital statistics for 1924 give slightly less satisfactory figures than in the previous year.

The birth-rate shows a serious drop from 18.28 to 17.07. It is possible that the prevalent unemployment and shortage of housing accommodation may affect the problem, but the main reason for the decrease would appear to be the fact that, according to the Registrar General, the County birth-rate population has been largely increased by the military in the Amesbury and Pewsey Rural Districts, without corresponding result in child life. The national birth rate was 18.8.

The death-rate is slightly higher than in 1923, being 11.41 compared with 10.98, due in some degree to the increased number of deaths from influenza, namely 175 against 64 in the previous year. The rate for England and Wales is 12.2. Cancer and tuberculosis accounted for 408 and 246 deaths as against 443 and 238 in 1923. Heart disease, bronchitis, and the various forms of pneumonia accounted for over 900 deaths between them.

The infant mortality rate has risen from 51.4 to 54.6, but the national rate has also increased from 69 to 75. Twenty years ago the infant mortality in Wiltshire was equivalent to 96 deaths out of every 1,000 births, and it is satisfactory to note the great strides which have been made in the preservation of infant life in the County.

The deaths occurring in women as a consequence of child birth numbered 21 against 13, and it is regrettable that this increase has taken place. The number is less by 3 than that recorded in 1922.

The mortality from measles, whooping cough, and diarrhoea remained low in proportion to the prevalence of these diseases.

3. NOTIFIABLE DISEASES DURING THE YEAR.

	Smallpox.	Diphtheria.	Scarlet Fever.	Enteric Fever.	Puerperal Fever.	Pneumonia, Primary and Influenza.	Erysipelas.	Malaria.	Encephalitis Lethargica.	Dysentery.	Cerebro-spinal Fever.	Chickenpox.
URBAN.												
Bradford-on-Avon	—	3	—	1	—	2	3	—	—	—	—	—
Calne	—	1	7	—	—	2	2	—	—	—	—	—
Chippenham	—	2	6	—	2	9	1	—	1	—	—	2
Devizes	—	2	18	—	1	—	—	—	—	—	—	—
Malmesbury	—	—	—	—	—	1	—	—	—	—	—	2
Marlborough	—	—	11	1	—	2	—	—	—	—	—	—
Melksham	—	—	2	1	—	1	—	—	—	—	—	—
Salisbury	—	36	22	—	—	6	—	—	1	—	—	—
Swindon	—	60	21	—	2	175	14	1	2	—	—	104
Trowbridge	—	2	17	—	2	—	—	—	—	—	—	8
Warminster	—	—	1	—	—	—	—	—	—	—	—	—
Westbury	—	—	2	—	—	1	—	—	—	—	—	—
Wilton	—	—	2	—	—	2	—	—	—	—	—	—
RURAL.												
Amesbury	—	4	17	1	1	11	2	—	1	—	1	—
Bradford-on-Avon	—	2	—	—	—	1	1	—	1	—	—	—
Calne	—	1	10	—	—	2	1	—	—	—	—	—
Chippenham	—	34	34	1	—	2	—	—	1	—	—	37
Cricklade and Wootton Bassett ...	—	6	20	1	—	11	4	—	—	—	—	24
Devizes	—	8	13	1	—	2	—	—	—	12	—	—
Highworth	—	74	13	—	3	9	4	—	—	—	—	16
Malmesbury	—	3	5	2	—	5	—	—	—	—	—	—
Marlborough	—	1	1	—	—	2	2	—	—	—	—	—
Melksham	—	—	—	—	1	1	—	—	—	—	—	—
Mere	—	3	—	—	1	3	—	—	2	—	—	—
Pewsey	—	2	18	—	1	9	1	1	1	—	—	—
Ramsbury	—	2	9	—	—	8	5	1	—	—	—	—
Salisbury	—	4	4	1	—	1	—	—	—	—	—	—
Tetbury	—	—	—	—	—	—	—	—	—	—	—	—
Tisbury	—	—	1	2	—	8	2	—	—	—	—	—
Warminster	—	5	1	—	—	—	—	—	—	—	—	—
Westbury	—	1	13	—	—	—	—	—	—	—	—	—
Wilton	—	8	16	—	—	1	—	—	2	—	—	—
Urban Districts	—	106	109	3	7	201	20	1	4	—	—	116
Rural Districts	—	158	175	9	7	76	22	2	8	12	1	77
Administrative County—												
Cases notified	—	264	284	12	14	277	42	3	12	12	1	193
Deaths	—	12	3	—	10	*	*	*	4	*	1	*

*The numbers of deaths from these diseases are not known.

Whilst elsewhere smallpox has continued to occur and to inflict a heavy burden on many communities, Wiltshire has remained completely free from this disease, either in the severe form which has characterised certain outbreaks or in the mild form which presents one of the most difficult and anxious problems of public health administration. I have been called into consultation upon a number of suspected cases in various parts of the County, but in every instance have found sufficient clinical evidence to be satisfied that the infection was not smallpox. The responsibility of administrative measures now rests upon the County Council, particularly in respect of hospital accommodation as described later, and it is a matter of profound satisfaction that within a short time there will be available permanent accommodation for cases from any part of the County.

Whilst the numbers of cases of diphtheria in urban areas were practically the same as during 1923, those in rural areas were almost double. Twelve deaths were recorded in each year. The majority of these cases occurred in and around Swindon, whereas in the previous year Salisbury was mainly affected. A malignant outbreak occurred at Colerne in the Chippenham Rural District in the spring, involving 26 cases and 6 deaths of children. This outbreak threatened to become very serious, and special assistance was given by the County Public Health Committee by the placing of a health visitor in the village to follow up suspected cases and contacts, and to impress the necessity for precautions. The infection was rapidly brought under control through the combination of effort, which illustrated the value of immediate and thorough measures, especially in an outlying area where the freedom from this infection for many years had led to ignorance of its danger.

Scarlet fever continues to show a welcome decrease, 284 cases being notified as against 538 in 1923 and 908 in 1922. No localised outbreaks of any magnitude occurred, and only three cases ended fatally.

Enteric or typhoid fever showed a slight increase, twelve cases occurring as against four in 1923. These cases were scattered in various parts of the County, and continued watchfulness is obviously still needed to guard against a possible recurrence of outbreaks of this disease, which used to be common-place occurrences. All the twelve patients recovered.

Fourteen lying-in women contracted puerperal fever, and records of all these cases are kept in my Department. From the information in my possession it would appear that five deaths resulted, although the Registrar-General gives the figure as ten, the figure shown in the table of notifiable diseases. The only explanation is that several cases must have escaped notification, or possibly deaths which occurred outside the County related to usual residents in Wilts. Two deaths in the practice of the same midwife caused grave concern to the Public Health Committee, particularly as the infection was undoubtedly carried from the one patient to the other. All the cases were investigated, and although in the majority no carelessness could be proved against the midwives, the increase of these cases is a cause for much uneasiness. In 1923 there were nine and in 1921 six. The following table shows the type of practice in which these cases occurred :—

	Attendants.	Births.	Cases of Puerperal Fever.	Rate per 1,000 Births.
Bona-fide Midwives	731	1	1.37
Trained Nurses, including District Nurse Midwives	2756	9	3.26
Doctors	1751	4	2.28

The number of cases of primary and influenzal pneumonia was double that of the previous year. This is probably accounted for by the extraordinarily wet and depressing climatic conditions of the year and the prevalence of influenza.

Sleepy sickness was notified in twelve cases as against three in 1923. Four of these cases terminated fatally and most of the others left more or less permanent damage to the nervous system. Various other cases have occurred which have escaped notification, either owing to no medical man being in attendance at the time of the illness or to the symptoms not becoming characteristic until after the acute stages. This disease frequently reduces a bright intelligent individual to a condition of permanent feeble-mindedness, and its control is therefore eminently desirable though at present beyond our power. Five children of school age have survived the disease with impaired mentality and a sixth with facial paralysis.

Twelve cases of dysentery were reported from the County Mental Hospital, Devizes, but this disease was confined to that institution.

The following is a summary of informal notifications of infectious and contagious disease received from Head Teachers of elementary schools during the year :—

Scarlet Fever	...	...	...	144	Scabies	...	...	...	21
Diphtheria	...	...	...	97	Impetigo	...	...	...	124
Measles	...	...	...	635	Ringworm	...	...	...	66
Whooping Cough	...	...	...	781	Other Diseases	...	...	...	121
Chicken Pox	...	...	...	788					—
Mumps	...	...	...	484				Total	3292
Sore Throats	...	...	...	31					—

TUBERCULOSIS.

STAFF.

Dr. Crossley was absent on account of illness for the first six months of the year, his work being carried on by Dr. Bowes, Dr. Johnstone and Dr. Mackenzie, the latter being appointed temporarily for four months. Dr. Bowes left the County service in August, 1924, and his place has been taken by Dr. C. Dunscombe, who attends the Salisbury Dispensary, and also acts as Medical Officer to Harnwood Hospital. Dr. Johnstone also left in December, 1924, and has been succeeded by Dr. J. B. Lowe, who lives in the north of the County and undertakes the Swindon Dispensary.

DISPENSARIES.

The arrangements for these are now as follows :—

Dispensary.	Day open.	Name of Dr. attending.
The School Clinic, Bythesea Road, Trowbridge	Wednesday	Dr. L. Crossley
Out-Patient Department, The General Infirmary, Salisbury	Thursday	Dr. C. Dunscombe.
15, Milton Road, Swindon	Thursday	Dr. J. B. Lowe.

The Dispensaries are open at 10 a.m., and new patients are seen between 10 a.m. and 1 p.m.

Dr. Crossley is available to see patients at their own homes in any part of the County, at the request of their doctors, if particulars are sent to him at the County Offices, Trowbridge.

SANATORIA BEDS.

The County Council maintains 32 beds at Winsley Sanatorium, and the daily average number of patients in these beds during 1924 was 31.0 as compared with 30.7 in 1923.

HOSPITAL BEDS.

Harnwood Hospital, Salisbury, has 42 beds, 30 being for male and 12 for female patients. The daily average number of patients was 37.2 as compared with 37.5 in 1923. The demand, especially for beds for female patients, continues to be more than maintained. This hospital was provided for pulmonary cases, though occasional chronic non-pulmonary cases are admitted. The available accommodation and nursing for the latter are, however, strictly limited, and the present County scheme does not admit of institutional treatment for the general run of these cases.

NON-PULMONARY TUBERCULOSIS.

Treatment has been provided by the County Council during the year for 31 patients at the following special hospitals:—Twelve at Savernake Hospital, eleven at Bath Orthopaedic Hospital, three at the Salisbury General Infirmary, three at Wingfield Orthopaedic Hospital, one at Heatherwood Hospital and one at the Alexandra Hospital, Swanley. Many of the other notified cases of non-pulmonary tuberculosis have received treatment at the various General and Cottage Hospitals, as ordinary hospital patients. The Orthopaedic Clinics which have been started at Devizes, Trowbridge, Corsham and Swindon, in connection with the Children's Orthopaedic Hospital, Bath, have been of great value to the Tuberculosis Scheme, as they provide additional means of early diagnosis, treatment at a special orthopaedic hospital, and the supervision and after-care of patients on leaving the hospital.

SHELTERS.

The 40 shelters, nine of which are at Harnwood Hospital, and one each at Trowbridge and Malmesbury Cottage Hospitals, have been in full use during the year.

EXAMINATION OF SPUTUM.

This is undertaken at the expense of the County Council for nearly all patients attending the Dispensaries, and for other patients under observation or treatment by their own doctors. Medical Practitioners may obtain the necessary outfits from the Pathologist, Bath Central Laboratory, Royal United Hospital, Bath, or the Pathologist, The General Infirmary, Salisbury.

The total number of specimens taken during the year was 551, of which 363 were examined at Bath and 188 at Salisbury.

Of these 113 were sent from Swindon Dispensary.

62	„	„	Trowbridge Dispensary.
55	„	„	Salisbury Dispensary.
87	„	„	Harnwood Hospital.
142	„	„	G.W.R. Medical Fund Society.
92	„	„	General Practitioners.

X-RAY EXAMINATIONS.

The existing arrangements for X-Ray examinations are at present being revised, and it is hoped that it will be possible to arrange a more extended scheme for use for tuberculous cases on the same footing as for orthopaedic cases.

PROVISION OF SURGICAL APPLIANCES.

These, in the form of splints, crutches and dressings, have been supplied to seven patients during the year on the recommendation of the Tuberculosis Officers, applications having in some cases been received from the orthopaedic clinics.

HOME NURSING.

This has only been provided for one patient during the year. The County Council can pay for such nursing, if application is made to the Tuberculosis Officers and sanction secured. Such application should be made at the commencement of treatment, as it is not possible to pay retrospectively for nursing which has been privately arranged.

TRAVELLING EXPENSES OF PATIENTS.

Necessitous patients, who would not otherwise be able to attend the dispensaries or travel to the institutions, are paid their travelling expenses by the County Council. During the year the sum of £3 0s. 2d. was paid for railway expenses and £36 4s. 6d. for ambulance charges.

DENTAL TREATMENT.

During the year, dental treatment has been given by the County Dentists to 40 patients, either at the Tuberculosis Dispensaries or by visits to Winsley Sanatorium or Harnwood Hospital.

SCHOOL CHILDREN.

A large number of children attend the dispensaries, sent either by their own doctors or referred by the School Medical Inspectors. In the year under review 194 attended for the first time. Very few of these are found to be definitely tuberculous, but nearly all of them are weakly children who are likely to develop tuberculosis, and who would greatly benefit by treatment at a special open-air School. At present this is not available.

Institutional treatment was provided for 40 children under 14 years of age, during 1924, viz. :—

			Pulmonary cases.	Non-Pul. cases.	Pre-tuber- culous cases.	Total.
Winsley Sanatorium	...	...	3	3	9	15
Harnwood Hospital	...	...	4	1	—	5
Savernake Hospital	...	...	—	6	—	6
Bath Orthopædic Hospital	...	...	—	8	1	9
Salisbury Infirmary	...	...	—	1	—	1
Wingfield Orthopædic Hospital...	...	...	—	2	—	2
Heatherwood Hospital	...	...	—	1	—	1
Alexandra Hospital	...	...	—	1	—	1
			—	—	—	—
Total	...	...	7	23	10	40
			—	—	—	—

All the pre-tuberculous cases were " Contacts " who had lost a near relative (Father, Mother Brother or Sister) from tuberculosis.

The following table shows the work under the County Council's scheme during the years 1923 and 1924 :—

					1923.	1924.
Number of new cases sent to Dispensaries for first time for exam-						
ination by Tuberculosis Officers	...	...	...	...	562	578
„ Children (included in above)	...	...	...	...	158	194
„ Attendances at Dispensaries	...	...	...	...	1583	1612

	1923.	1924.
Number of new cases of pulmonary tuberculosis	170	150
„ „ „ non-pulmonary tuberculosis	27	30
„ Patients treated at Winsley Sanatorium (including 16 children under 16 years, of whom 15 were of school age)	156	136
„ Patients treated at Harnwood Hospital (including 6 children under 16 years, of whom 5 were of school age)	121	116
„ Patients treated at Special Hospitals (including 24 children under 16, of whom 20 were of school age	19	31
„ Patients provided with Shelters	45	30
„ „ „ Splints, Dressings, etc.	5	7
„ Patients treated by County Council Dentists	29	40
„ Patients under observation or supervision by Tuberculosis Officers	1459	1135

NOTIFICATION.

The total number of primary notifications by practitioners, of all forms of tuberculosis during the year was 428, viz., pulmonary tuberculosis 311, non-pulmonary tuberculosis 117.

Every opportunity is taken to impress the necessity of notification on practitioners, but the result is still not completely satisfactory.

The Public Health (Tuberculosis) Regulations, 1912, made compulsory the notification of all forms of tuberculosis, whether pulmonary or non-pulmonary.

It is therefore regrettable to have to record that in 1924, notices of 215 deaths from tuberculosis were received from the local Registrars, of which 45 had not been notified; ten of these were due to Meningitis or Peritonitis in infants, and probably diagnosis was not made until shortly before death, but the remaining 35 were adults and should have been notified before. The ratio of non-notified deaths to the total is thus about one in five.

The following table shows the number of cases notified since 1913 :—

Year.	Total.	Pulmonary.	Non-pulmonary.
1913 ...	540	382	158
1914 ...	491	356	135
1915 ...	447	348	99
1916 ...	438	362	76
1917 ...	432	349	83
1918 ...	422	338	84
1919 ...	363	308	55
1920 ...	370	294	76
1921 ...	423	309	114
1922 ...	412	302	110
1923 ...	446	299	147
1924 ...	428	311	117
—	—	—	—
Total ...	5212	3958	1254
	—	—	—

The following table shows the number of cases of pulmonary and non-pulmonary tuberculosis notified from each district in the County, during the year 1924, and during the period 1913-24 :—

URBAN DISTRICTS.

			1924.			1913-24.		
			Pulmonary.	Non-Pul.	Total.	Pulmonary.	Non-Pul.	Total.
Bradford-on-Avon	...	...	2	2	4	47	10	57
Calne	...	...	4	4	8	49	15	64
Chippenham	...	...	13	2	15	161	40	201
Devizes	...	...	3	1	4	86	3	89
Malmesbury	...	...	1	—	1	41	16	57
Marlborough	...	...	4	3	7	28	18	46
Melksham	...	...	5	2	7	43	20	63
Salisbury	...	...	19	5	24	324	67	391
Swindon	...	...	74	39	113	1019	486	1505
Trowbridge	...	...	8	2	10	134	26	160
Warminster	...	...	8	2	10	93	35	128
Westbury	...	...	5	2	7	54	17	71
Wilton	...	...	4	3	7	37	13	50
Total			150	67	217	2116	766	2882

RURAL DISTRICTS.

			Pulmonary.			Pulmonary.		
			Pulmonary.	Non-Pul.	Total.	Pulmonary.	Non-Pul.	Total.
Amesbury	...	...	15	5	20	131	29	160
Bradford-on-Avon	...	...	5	1	6	71	15	86
Calne	...	...	2	2	4	59	13	72
Chippenham	...	...	16	5	21	226	56	282
Cricklade	...	...	10	1	11	84	20	104
Devizes	...	...	11	1	12	119	14	133
Highworth	...	...	22	8	30	214	68	282
Malmesbury	...	...	11	5	16	116	46	162
Marlborough	...	...	3	—	3	45	20	65
Melksham	...	...	5	4	9	36	13	49
Mere	...	...	4	2	6	59	11	70
Pewsey	...	...	10	5	24	212	42	254
Ramsbury	...	...	7	1	8	75	20	95
Salisbury	...	...	5	—	5	93	20	113
Tetbury	...	...	—	—	—	—	1	1
Tisbury	...	...	5	3	8	64	12	76
Warminster	...	...	5	—	5	70	29	99
Westbury	...	...	3	2	5	53	20	73
Wilton	...	...	13	5	18	115	39	154
Total			161	50	211	1842	488	2330

The following table shows the age groups of the total number of new cases, including those notified by practitioners as well as those discovered by other means :—

Age Periods.	Pulmonary.		Non-Pulmonary.	
	Male	Female	Male	Female
0	—	—	4	1
1	1	—	16	16
5	5	11	15	4
10	4	10	15	9
15	26	11	12	9
20	31	24	5	7
25	33	50	1	5
35	27	33	—	7
45	19	15	2	3
55	16	10	—	—
65 & upwards	7	6	—	3
Total	169	170	70	64

The total number of deaths due to tuberculosis was 246, consisting of 182 due to pulmonary, and 64 due to non-pulmonary infection.

The general death-rate from tuberculosis for the County was 0.83 per 1,000 of the death-rate population, compared with 0.81 in the previous year.

The death-rate for the County from all causes was 11.41 as given earlier in the report.

OPHTHALMIA NEONATORUM.

The table given below shows in summarised form the number of notifications, where treated, and ultimate condition of the sight. The cases numbered 27 against 56 in 1923.

The arrangement was continued at Swindon, whereby midwives are asked to notify all cases of discharging eyes, however slight, to the Borough Medical Officer of Health. Under this scheme, 13 notifications were received by Dr. Brewer, and the cases subsequently treated at the Borough Child Welfare Clinic, with most satisfactory results.

It is a pleasure to record that no case in the County resulted in permanent blindness during the year from this disease, which in the past has regularly added to the numbers of the totally blind.

Cases.			Vision Unimpaired.	Vision. Impaired.	Total Blindness.	Deaths.
Notified.	Treated.					
	At Home.	In Maternity Home, Hospital, Workhouse, or at Clinic.				
27	8	19	*26	†1	—	—

*One case at Swindon developed interstitial keratitis, but it is probable that vision will not be permanently impaired.

†Child admitted to V.D. Hospital, Swindon, from Malmesbury district, when 25 hours old. On admission the left eye was hopelessly lost, and the right eye was severely damaged. After some months treatment a very fair degree of vision was preserved for the right eye.

4. CAUSES OF SICKNESS.

With the exception of an increase in the incidence of influenza, the causes of sickness and invalidity remained much the same as usual. Inquiry has brought into prominence the incapacity resulting from encephalitis lethargica, as already mentioned, but the total numbers of these cases are happily few in this County.

5. SUMMARY OF NURSING ARRANGEMENTS, HOSPITALS, AND OTHER INSTITUTIONS AVAILABLE FOR THE DISTRICT.

PROFESSIONAL NURSING IN THE HOME.

The general nursing is either undertaken by private nurses supplied through nursing agencies and otherwise, or by District Nurse-Midwives working under Voluntary District Nursing Associations. Home nursing for infectious diseases, such as measles, may be, to some extent, similarly supplied. For none of these services is financial assistance provided by the County Council, and such work is only co-ordinated with the various activities of the County Council inasmuch as the District Nurse is usually also the District Midwife and part-time Health Visitor and School Nurse, and her work generally is within the purview of the Health Department of the County Council. Owing, moreover, to the arrangement by which Dr. Agnes Semple, Assistant County Medical Officer and Inspector of Midwives, acts also as executive officer of the County Nursing Association, the whole range of work of the County Nursing Association is performed in close co-operation with the County Council. This co-operation is particularly valuable in the selection of candidates for training, the supervision of their training, their allocation to suitable areas, and also in the formation of new District Associations, and the maintenance and assistance of existing Associations.

MIDWIVES.

During the year 222 midwives gave notice of their intention to practise midwifery in the County, 203 of whom held the Central Midwives Board Certificate or that of an equivalent qualifying body, whilst the remaining 19 represents the decreasing number of midwives who were in practice prior to the passing of the Midwives Act, 1902, and had passed no examination. The total number of practising midwives in 1923 was 237.

The reduction in the number during the present year is mainly accounted for by fewer emergency midwives notifying their intention to practise for a short time. Three bona-fide nurses gave up practice during 1924.

The following table has been compiled from the returns received from the midwives of their work during the year 1924 :—

	Cases Attended.		Total.
	As Midwife.	As Mater- nity Nurse.	
Trained nurses of Associations	1496	407	1903
Trained nurses in private practice	782	243	1025
Bona-fide Midwives	731	135	866
Midwives attached to Salisbury General Infirmary	73	62	135
Midwives attached to Swindon Maternity Home ...	293	26	319
Midwives attached to Corsham Maternity Home ...	39	36	75
Midwives attached to Malmesbury Maternity Home	54	20	74
Midwives attached to The Retreat, Mere	19	4	23
	3487	933	4420

Six bona-fide midwives with town practices attended over 50 cases each during the year, the respective numbers being as follows :—191(16), 144(6), 142(46), 90(2), 63(4), and 57(6).

The figures given in brackets are included in the totals, but refer to cases attended as maternity nurse.

Certified midwives attended 3,487 births in the County during the year, or 66 per cent. of the total births registered in the County, as against 63 per cent. in 1923. The average number of births attended by midwives, acting as midwives and maternity nurses, was just under 20 each per annum.

The following notices were received from midwives during the twelve months, the corresponding figures for 1923 being given in brackets.

Sending for Medical Aid	...	...	...	...	...	...	648 (681)
Laying out the Dead	...	...	...	...	...	...	37 (30)
Temperature Charts (in special cases)	...	...	...	...	...	...	37 (25)
Contact with Infectious Disease	...	...	...	...	...	...	25 (27)
Still-Births	...	...	...	...	...	...	64 (66)
Deaths of Mothers or Children	...	...	...	...	...	...	45 (9)
Artificial Feeding	...	...	...	...	...	...	98 (95)
							<hr/> 954 (933) <hr/>

It will be noted that there is a considerable increase in the number of notifications received in respect of the deaths of mothers or children. This is accounted for by the fact that under the new Rules of the Central Midwives Board which came into force at the beginning of the year, it became the duty of the midwife to notify all deaths occurring in her practice, whether they occurred before or after the attendance of a medical practitioner.

No case of infringement of the rules of the Central Midwives Board was reported to the Board during the year, but various lapses on the part of practising midwives received the consideration of the Supervising Authority, and in some cases the midwife received the censure of the Authority. One midwife was ordered to attend before the Committee.

Dr. Agnes Semple inspected a large number of midwives during 1924, the majority being new nurses who had recently started work in the County, or nurses requiring particular observation in their methods of practice. These inspections were in addition to those carried out by the eight Health Visitors acting as Assistant Inspectors in their respective districts. The work is exacting in its nature, and not always pleasant in performance, but its importance is constantly in evidence.

The County Council continued to make payments to some 70 District Nursing Associations and to five certified midwives. The allocation of the available total amount to the various Associations has been the subject of much consideration by the Committee, and the ultimate distribution has insured the continuance of many Associations which could not otherwise have been maintained.

The work of the five subsidised midwives has been watched with particular care, and for the most part these midwives afford a valuable means of providing for areas otherwise unserved. On the expiration of the annual payment to a sixth nurse, the subsidy was not renewed in consequence of the formation of a District Nursing Association which covered the parishes concerned. The rest of such areas have their needs met either by payment by the County Council of travelling expenses to induce neighbouring midwives to take cases therein, or, occasionally, by admitting cases therefrom to the County Maternity Homes.

Four midwifery scholarships were awarded by the County Council during the year, two in January, one in March, and one in December. In addition a number of nurses received free training, under the Wilts County Nursing Association, and were afterwards drafted to

various parts of the County as District Nurses or Emergency Nurses. Under the terms of agreement of these nurses, they are obliged to work for either one and a half or three years in the County of Wilts wherever they may be sent by the County Nursing Association.

A difficulty arose during the year at the Swindon Maternity Home as to the number of pupil midwives who might be trained at that institution, having regard to the amount of midwifery work undertaken by the nurses attached to the Home. The number of pupils had never previously been directly limited by the Central Midwives Board, but at the end of 1923 was specified as eight only. Permission was asked for this limit to be modified, provided that the pupils concerned had ample opportunity of attending not less than twenty cases each during the period of training.

After protracted correspondence with the Board and the Ministry of Health the number was relaxed first to ten and finally to twelve. The position has thus become satisfactory, although at one time serious consequences to the whole County midwifery service seemed not unlikely.

The following are the statistics in regard to the working of the Midwives Act, 1918, during the year, the corresponding figures for 1923 being given in brackets :—

Number of cases in which certified midwives sent for medical aid	...	648	(681)
Number of cases in which the doctor claimed fees from the County Council	...	311	(398)
Percentage of cases in which the doctor claimed fees from the County Council	... ..	47.9	(58.4)
Approximate amount of doctors' fees paid by the County Council	...	£561	(£790)
Approximate amount recovered from the patients	... ..	£236	(£236)
Balance not recovered	... ..	£325	(£554)
Less 50 per cent. grant from Government Funds	... ..	£162	(£277)
Net sum payable by County Council for the twelve months	... ..	£163	(£277)

The financial details given above refer to the respective financial years, and not to the calendar years as in the case of the other statistics.

The expenditure under this Act is automatic and not subject to control, except in so far as repayments from patients can be obtained. These repayments are not keeping pace with the total expenditure, but the expense is more than justified as long as the proper degree of obstetric skill on the part of the practitioner is assured.

MATERNITY AND CHILD WELFARE.

A total of 3,873 births was registered in the area of the County for which the County Council is responsible for child welfare. Of this total 3,782 births were notified under the Notification of Births Act, whilst the number of un-notified births was 91, equivalent to 2.3 per cent. of those that should have been notified. This percentage compares with 2.5 in 1923.

Each notification of birth is made the starting point of a system of supervision up to twelve months of age of the infant concerned, except, of course, where such supervision by the Health Staff is obviously not appropriate. Owing to vacancies in the whole-time staff and changes amongst the district nurses, supervision of children was not as continuous in some cases as desirable, although no infants urgently requiring to be watched were overlooked.

As mentioned in my last report, the County Council co-operates with certain Boards of Guardians in regard to the supervision of infants boarded-out for gain under the terms of Part I. of the Children Act 1908. This scheme was extended in 1924 as a result of representations from the Ministry of Health and supervision is now continued until the age of seven years. The large majority of Boards of Guardians in the County have decided to co-operate in the extended scheme, and nearly one hundred boarded-out children are at present under supervision by the Health Visitors, whose quarterly reports are regularly forwarded to the Guardians concerned. Such children are more prone to be neglected than the ordinary child population and already some excellent results have accrued from this arrangement for safeguarding their health and comfort.

In consequence of a communication from the Ministry of Health commenting on the relatively high rate of maternal mortality in the County, an arrangement was made whereby District Medical Officers of Health were asked to furnish details of all deaths from complications of child-birth on payment of a small fee. A number of such notifications were received, but it is too early to judge their value or completeness. The efficient treatment of mothers in every part of the County before, at, and after confinement, is an object of deep solicitude to the Public Health Committee, and no opportunities are being missed to provide efficient treatment where this would otherwise be lacking. Ante-natal work has been started on successful lines in connection with the Trowbridge Child Welfare Clinic, and can be made part of the work of the rapidly increasing number of such clinics in the County. The employment of practitioners of special experience for ante-natal work is another development which is engaging careful consideration.

The work of the District Nurses in connection with infant welfare is included in the figures already given. The following more detailed statement refers to the whole-time staff only:—

RECORD OF WORK DURING THE YEAR 1924 BY THE WHOLE-TIME
HEALTH VISITORS AND SCHOOL NURSES.

Centre.	Tuberculosis Dispensary Attendances.	Visits to Tuber- culous Patients.	Visits paid to Schools.	School Home Visits.	Number of Inspections of Midwives.	Number of First Visits to Infants.	Total Visits to Infants.	*Attendances at Clinics.
Trowbridge ...	52	268	26	44	61	183	1142	91
Chippenham ...	3	164	226	565	37	100	1070	11
Salisbury ...	45	279	81	141	92	88	539	28
Devizes ...	—	157	186	268	34	183	1274	21
Swindon ...	47	458	64	188	51	43	107	23
Easton Royal ...	—	165	226	453	61	83	231	7
Trowbridge (School Nurse)	—	—	366	392	—	—	2	78
TOTAL ...	147	1491	1175	2051	336	680	4365	259

*These relate to attendances at orthopaedic, ophthalmic, infant welfare, and minor ailments clinics.

The Calne and Warminster centres have been omitted in this table as the work in those areas was so seriously interrupted by vacancies in the staff.

The figures for the various districts are not given for the purpose of comparison, as local circumstances differ in practically each instance, particularly as regards travelling facilities.

CLINICS AND TREATMENT CENTRES.

MATERNITY AND CHILD WELFARE CENTRES.—The following table shows the number of attendances at the various Centres in the County during the year:—

	CENTRES.					
	Ashton Keynes.	*Corsham.	Downton.	Malmes- bury.	Trow- bridge.	Wilton.
No. of Clinics held	12	5	24	24	48	23
No. of attendances of Children	320	49	490	40	764	297
No. of attendances of Medical Officer	10	4	24	—	48	12
No. of attendances of Health Visitor	12	5	21	—	48	23

*Centre opened on the 10th October, 1924.

The Centre at Trowbridge is the only one which is administered directly by the County Council, the others being under Voluntary Committees.

The Centres at Downton and Wilton have been approved by the Ministry of Health, and receive a grant therefrom.

The Committee at Ashton Keynes has applied to the Ministry for similar recognition, and doubtless Corsham will also apply after the Centre has been in operation for a reasonable period.

At the end of the year there appeared a prospect of the opening of three further voluntary clinics at Melksham, Chippenham, and Warminster.

The supplies of milk and Roboleine, though not often arranged through the Child Welfare Centres, may conveniently be mentioned here.

Roboleine and Full Cream Trumilk is supplied for backward infants, after proper recommendation, on repayment by parents at wholesale prices. A total amount of 103 lbs. of Roboleine and 31 lbs. of Full Cream Trumilk was thus supplied during the year.

Thirty-two new applications for milk for mothers and infants were received during 1924, of which twenty-six were granted and six refused.

Fifty-six applications for renewal from persons who had previously received a supply were made, fifty-four of which were granted, and two refused. The quantity of milk supplied was usually one pint per day, but in a few special cases two pints per day were granted. Careful inquiry was always made into the applicants' circumstances before an allowance was given,

and no allowance was made for more than a period of one month at a time. The number of cases in which this provision was made again showed an increase over the previous year, but all were definite cases of necessity.

The County Council now administers these Regulations in all districts in the County, other than the Borough of Swindon and City of Salisbury, but cases which are found to be in receipt of poor law relief are referred for consideration to the Boards of Guardians concerned in order to prevent overlapping.

ORTHOPAEDIC CLINICS.—The formation of these voluntary clinics is mentioned in the section relating to tuberculosis, but statistics under this heading are now given in regard to the treatment of non-tubercular children under school age. None of the clinics were open for the whole year, and some only for a few sessions.

Name of Clinic.	Number of Cases under the age of 5 years seen during the Year.	Total No. of Out-Patient Attendances made during the Year.	Treatment Recommended.				
			In-Patient.	App-liances.	Plaster.	Exer-cises.	Observ-ation.
Corsham ...	3	21	1	1	1	—	1
Devizes... ..	20	124	2	7	7	2	4
Swindon... ..	1	1	—	—	—	—	1
Trowbridge ...	5	11	1	—	1	1	3
TOTALS	29	157	4	8	9	3	9

Of the cases recommended for in-patient treatment, two were admitted to the Bath Orthopaedic Hospital before the end of the year, and the others are on the waiting list. Surgical appliances were supplied or altered in all cases where required.

The number of infants seen at the Devizes Clinic was greatly in excess of that at the other Centres, but this was due mainly to the opening of that Clinic early in the year.

DAY NURSERIES.—None have been established in the County area.

SCHOOL CLINICS.—The only permanent School Clinic is that held at the Bythesea Road premises in Trowbridge on Tuesday and Saturday mornings. Various temporary school clinics are held in connection with ophthalmic and dental treatment, and the work of all these clinics is fully described in the current report on the School Medical Service.

TUBERCULOSIS CLINICS.—These are dealt with under “Tuberculosis” in Section 3.

VENEREAL CLINICS.

The Swindon Clinic is the property of the County Council, the premises at Salisbury are rented by the County Council from the Infirmary authorities, and the County Council's share in the Bath Clinic is on a contributory basis determined by the amount of in-patient and out-patient treatment received by Wilts patients.

The following table shows the days and times of clinics :—

	Men.	Women.
Royal United Hospital, Bath.	Friday, 5 to 6-30 p.m. Saturday, 5 to 6-30 p.m.	Tuesday, 5 to 6-30 p.m.
The Infirmary (Skin Dept.), Salisbury	Tuesday, 11-30 a.m. to 12-30 p.m. Friday, 6 to 7-30 p.m.	Wednesday, 6 to 7-30 p.m. Saturday, 11-30 a.m. to 12-30 p.m.
Isolation Hospital, Gorse Hill, Swindon	Wednesday, 7 to 8-30 p.m. Saturday, 1-30 to 3 p.m.	Tuesday, 5 to 6-30 p.m. Friday, 2 to 3-30 p.m.

It will be noted that the Bath clinics have been shortened by half-an-hour since the table was given in my last Report, otherwise the position remains the same.

The following table shows the number of patients who attended and were treated at the various Clinics, as in-patients and out-patients, and also the number of doses of Salvarsan substitutes given during the year, the figures for 1923 being given in brackets for comparison.

CENTRE.	No. of persons seen for the first time and found to be suffering from			Conditions other than Venereal.	Total.	Total No. of Attendances at the Out-Patient Clinics of Wiltshire Patients.	Aggregate No. of In-Patient days of Wiltshire Patients.	No. of doses of Salvarsan Substitutes given in	
	Syphilis.	Soft Chancre	Gonorrhoea.					Out-Patient Clinics.	In-Patient Depts.
Bath	5 (13)	— (1)	14 (15)	9 (16)	28 (45)	400 (521)	— (90)	65 (124)	— (9)
Salisbury ..	28 (42)	— (—)	32 (18)	46 (33)	106 (93)	3059 (3217)	340 (200)	192 (275)	6 (70)
Swindon ..	52 (51)	— (—)	58 (52)	28 (41)	138 (144)	3863 (3311)	408 (44)	411 (231)	2 (1)
*Bristol ..	— (3)	— (—)	1 (—)	— (4)	1 (7)	39 (36)	— (14)	30 (23)	— (—)
*London ..	— (1)	— (—)	1 (—)	— (—)	1 (1)	2 (19)	10 (—)	— (7)	— (—)
*Reading ..	— (—)	— (—)	1 (1)	— (—)	1 (1)	41 (59)	— (25)	— (10)	— (—)
TOTALS ..	85 (110)	— (1)	107 (86)	83 (94)	275 (291)	7404 (7163)	758 (373)	698 (670)	8 (80)

* The details of attendances of Wilts patients at Clinics in Bristol, London and Reading are kindly supplied by the Clinics concerned. No formal arrangement exists with these Clinics.

It will be noted that the amount of treatment given remained very much the same as in the previous year, although considerably more patients required institutional treatment. The attendances at the Bath clinic showed a drop, and it is noteworthy that this clinic, which serves a thickly populated part of the County, should be so little used.

The total number of children from the County under sixteen years of age treated for the first time at the clinics in 1924 was 32.

HOSPITALS PROVIDED OR SUBSIDISED BY THE COUNTY COUNCIL.

(1) TUBERCULOSIS HOSPITALS.—See Section 3.

(2) MATERNITY HOMES.—The following table shows the accommodation available for County Council patients, and the number of County and other cases admitted to the four Maternity Homes in Wilts with which the County Council has an arrangement.

	Accommodation available for County Council patients.	No. of County Council cases admitted during 1924.	No. of other cases admitted during 1924.
Malmesbury Cottage Hospital	3 beds	7	18
Corsham Maternity Home	6 beds	32	6
Swindon Maternity Home	5 beds	24	116
Salisbury General Infirmary, Maternity Ward	As required	46	89

The total County Council patients admitted was 109, compared with 85 in the previous year. There is a gradual increase in the use of these facilities by expectant mothers generally in the County. The Swindon Home, however, has not as yet justified itself as far as the County is concerned to the extent of the other Homes.

The financial arrangements between the authorities of these Homes and the County Council remain as described in my last report.

The Malmesbury and Corsham Committees receive contributions from patients and are thus able to lighten the cost of cases to the County Council. Nearly £200 was contributed direct by a total of 70 patients admitted to County Council beds at Salisbury and Swindon during the year. In some instances, patients paid as much as £6 towards the cost of their confinement in the Home, but others were admitted free.

In all those cases where maternity benefit is payable under the Insurance Act, it is expected that the amount so received by the patient shall form the minimum of her contribution towards the cost of her confinement in the Home.

The main qualifications for admission to County Council beds are as follows:—

- (a) Residence in the County of Wilts, outside the Borough of Swindon and City of Salisbury.
- (b) Home surroundings unsuitable for confinement.
- (c) Want of proper medical or nursing attention, owing to inaccessibility of home.
- (d) Anticipated complications of labour, or ante-partum conditions needing institutional care.

There is an increasing tendency for patients to avail themselves of treatment in the Homes for ante-natal complications, and there is no doubt that this is as important a function of the scheme as the actual facilities for confinement.

(3) CHILDREN'S HOSPITALS.—None are provided by the County Council. The County Council to a certain extent supports the Children's Orthopaedic Hospital at Bath, details of which are mentioned in other parts of the report.

(4) FEVER HOSPITALS.—The position remains as indicated in 1923, but, for the sake of reference, it may possibly be desirable to summarise in brief tabular form the various Isolation Hospitals in the County, and the areas thereby served.

Situation of Hospital.					Districts served.
Calne	...	...	...	...	Calne Urban and Rural.
Chippenham	...	...	...	...	Chippenham Urban and Rural.
Lydiard Millicent	...	...	...	...	Cricklade and Wootton Bassett Rural.
Devizes	...	...	...	...	Devizes Urban and Rural, and Pewsey Rural.
Marlborough	...	...	...	...	Marlborough Urban and Rural, and Ramsbury Rural.
Salisbury	...	...	...	...	Salisbury City, Salisbury Rural, Amesbury Rural, Wilton Urban and Rural, Tisbury Rural, and Mere Rural.
Swindon	...	...	...	...	Borough of Swindon, and Highworth Rural District.
Trowbridge	...	...	...	...	Trowbridge Urban District, Bradford-on-Avon Urban and Rural, Westbury Urban and Rural, Melksham Urban and Rural.
Warminster	...	...	...	...	Warminster Urban and Rural.

With regard to the Chippenham Hospital district, efforts were continued during 1924 to arrange for the area served by the Hospital to include the Malmesbury Urban and Rural Districts, which at present are without any permanent provision for the isolation of infectious cases. Various conferences on this question were held, and in August the Chippenham Isolation Hospital Committee indicated to the County Council that they were prepared to acquire additional land for extension purposes, build a new administrative block, and convert the existing administrative block into an observation ward, provided that the Malmesbury Urban and Rural authorities were willing to be included in the area served by the Hospital.

(5) SMALLPOX HOSPITALS.—In November, 1923, the Ministry of Health issued an order, constituting the County Council the authority for dealing with smallpox within the County.

Under the County scheme it is proposed to make sufficient provision for the isolation and treatment of smallpox cases by the purchase of the existing Smallpox Hospital at Salisbury from the Salisbury and District Joint Isolation Hospital Committee, and the erection of a new Hospital at Ogbourne, near Marlborough.

At the close of 1924, the purchase of the Salisbury Smallpox Hospital was completed, and it is therefore available for the reception of cases from the southern half of Wilts.

The plans for the building of the new Hospital at Ogbourne have moved slowly, mainly on account of difficulties in acquiring the land from King's College, Cambridge, and the settlement of compensation to the existing tenant. By the end of the year possession had been

obtained, and specifications were in course of preparation for the erection of the administrative block, concrete platforms, etc. The question of water supply, which had given considerable anxiety, was also nearing a solution.

In the meantime, the existing Smallpox Hospital at Swindon is available for cases arising in the northern area of the County, but this Hospital will no longer be used when the Ogbourne structure is ready for occupation.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS.

The only such institution is the Retreat, Mere, which is administered by a voluntary association assisted by grants from the Ministry. This institution has 16 beds, and admission is not restricted to any particular part of the country. Wilts cases are occasionally admitted to the Home.

AMBULANCE FACILITIES.

All Isolation Hospitals, with the exception of Marlborough and Calne, have motor ambulances for infectious cases. Non-infectious and accident cases are dealt with by the numerous Red Cross Ambulances in the County, or by private arrangement.

6.—LABORATORY WORK.

The only use to which the County laboratory is put as such is for the examination of hairs for ringworm. The laboratories in connection with the Salisbury Infirmary and Bath Royal United Hospital have done a great deal of work for the County Council and practitioners in Wilts. The County Council work has consisted mainly of examinations for tubercle and diphtheria, with occasional special investigations.

Wassermann tests of blood from suspected venereal cases are conducted for all the County Venereal Clinics at Bristol University, though much unofficial work of this kind is done at both the Hospital laboratories mentioned.

Chemical analyses of samples of effluents from sewage works, etc., continue to be made for the County Council by Messrs. Waterfall and O'Brien, of Bristol.

The County Analyst, Dr. Bernard Dyer, conducts all work under the Food and Drugs Acts, but this is not within the purview of the Public Health Committee.

Diphtheria anti-toxin is issued by the District Sanitary Authorities, but a small stock of other special sera is kept by the County Medical Department.

Arrangements for X-Ray examinations are being extended and it is hoped that such examinations will shortly be approved at a number of hospitals which are equipped with the necessary apparatus.

7.—SANITARY ADMINISTRATION.

SEWERAGE AND SEWAGE DISPOSAL, INCLUDING RIVER POLLUTION.

The Sewage Works of the County were inspected as usual during the year, and the following is a brief summary of the conditions found, particularly in respect of the existence or otherwise of river pollution.

URBAN DISTRICTS.

Bradford-on-Avon.—Two samples of effluent from these works were taken during the year. On both occasions the results of analyses showed the effluent to be of good quality.

Calne.—At the beginning of the year I attended a special meeting of the Calne Town Council to discuss the best means of preventing the undoubtedly serious and continuous pollution of the river Marden by sewage from the Council's works, and it was then decided to ask the advice of the Ministry of Health as to the most suitable system. The Town Council had affirmed by resolution in the previous December the necessity for remodelling their works.

I understand the Borough Surveyor has prepared plans of the proposed alterations, which would enable the sewage from certain districts outside the Borough to be dealt with in addition to the town sewage, but formal action appears not yet to have been taken thereon.

No samples of effluent were obtained during 1924, as the existing pollution requires no further analytical proof.

Chippenham.—The Westmead Works were visited on two occasions during the year, and pollution of the Avon was found to be taking place on a considerable scale. The analysts' report on the sample of effluent was most unsatisfactory.

The County Council has long been in communication with the Town Council on this matter, and reconstruction of the works has at length been completed on modern lines. There is now a good prospect that serious pollution will not recur from this source provided that care is taken in the management of these works.

The smaller Patterdown Works have also been inspected. These are a new works, and, with proper management, should give a satisfactory effluent, though the analysts' report on the sample taken in August, after filtration only, gave figures below the accepted standard.

Devizes.—These works were inspected in June and July. A sample of the effluent from the works was taken for analysis, which proved it to be of poor quality.

I understand that an improvement in the works is contemplated by the Town Council, and this is certainly desirable.

The effluent from the Council's works receives land treatment on County Council and other property before discharge into the stream.

More careful supervision of this treatment by the joint owners of the irrigation area was again found to be necessary.

Malmesbury.—The position remained unaltered as far as sewage disposal is concerned, and pollution of the river Avon therefore continues.

No complaints were received during the year with regard to the disposal of milk waste from the milk factory.

Marlborough.—In consequence of pressure from the Thames Conservancy Board, the Marlborough Town Council have undertaken extensive alterations and additions to their sewage disposal works. This was not completed at the time of Dr. Johnstone's visit in August, when the river Kennet was being seriously but unavoidably polluted by practically crude sewage in consequence of the alterations then in progress.

The new works should deal efficiently with the sewage of Marlborough, provided that a proper measure of supervision will be maintained.

Melksham.—Inspection of these works showed good management, as on previous occasions. A sample of effluent taken for analysis was, however, reported as “fair” only.

There is a danger of the capacity of the works being overtaxed in view of the increase of the population served, and the attention of the Urban District Council has been drawn to this danger.

Salisbury.—There is no change to report in regard to this very satisfactory works. The sample taken was reported by the analysts as “first class.”

Swindon.—About one-sixth of the town sewage is treated at Broom Farm, and the remainder at Rodbourne Farm.

The Broom Farm Works are not of modern character, and at the June inspection it appeared desirable that the contact beds should be cleansed and possibly renovated. The effluent was, however, reported as good.

At the Rodbourne Farm Works, the reconstruction scheme was found to be practically complete in June. No sample of the effluent was taken for analysis as it was thought desirable to wait until the works had been a little while in operation. It would appear that the disposal of sludge will develop into a serious problem unless other means than those available are found.

Trowbridge.—In March I was able to report to the County Public Health Committee that the effluent from the sewage works and the old culvert was satisfactory and above the standard laid down by the Royal Commission, and that the pollution of the River Biss which still remained was, in my opinion, due to trade effluents alone.

In August Dr. Johnstone found the condition of the sewage works generally satisfactory and the sample of effluent taken was reported upon as “first-class.” A further sample of river water taken at Ladydown Mill at the same time was described as “good river water,” and the condition of the stretch of the river below the town showed a marked improvement on that of two years ago.

Samples of trade waste submitted to the analysts for examination in February were reported as being exceptionally polluting in character, and described generally as being unfit for discharge into a river, or even to enter a sewage works.

The County Public Health Committee have determined that steps must be taken to stop pollution by trade waste, but I regret to have no satisfactory progress in this direction to record.

Warminster.—The land available at these works for irrigation purposes is heavily taxed, and the effluent discharging into the River Wylye appeared to be of poor quality on the occasion of a visit made in August. The figures of analysis confirmed the unsatisfactory nature of the effluent.

The attention of the Urban District Council was again drawn to the necessity for action, and a reply was received that consideration of the matter had been deferred until the appoint-

ment of a successor to Mr. Lawton, the Surveyor, who resigned his appointment as from the 31st December, 1924.

Westbury.—A satisfactory result was obtained from effluent taken from the new works in August, but the whole of the drainage area was not then connected, and the river Biss was consequently not free from pollution above the works. The Surveyor stated later in the year, however, that various further connections were being made to the new system, and the river should soon show signs of improvement.

Wilton.—No inspection of these works was made during the year owing to the absence of effluent.

RURAL DISTRICTS.

Amesbury.—The effluent from the works serving the village of Amesbury has not been traced to any water course.

The Shrewton Brook, which in the past has received considerable pollution from laundry waste in the village of Shrewton, is now in a much more satisfactory condition. An efficient disposal system for the laundry waste was installed last year by the owner, after consultation with Dr. Wilson and myself. When in the District in May I was satisfied that direct discharge into the stream would not recur, and I do not anticipate that there will be any further cause for complaint of pollution as far as the laundry is concerned.

Bradford-on-Avon.—The small works at Holt were inspected in August and a sample of effluent taken for analysis, which was found to be of a very poor quality. The distributing plates appeared to need replacement, and I understand that this had been carried out by the end of the year.

The Holt Tannery was again found to be discharging a highly polluting effluent, so that the stream at this point received pollution from two distinct sources.

Midford Brook receives pollution from villages in Somerset before entering the Bradford Rural District. I have been in touch with the Somerset Authorities on this matter and understand that all available steps are being taken.

Chippenham.—The sewerage systems at Box, Corsham, and Lacock, were inspected, and samples of effluent taken for analysis.

At Box the result of analysis proved better than was anticipated from the inadequate method of treatment, although the effluent cannot be classed as a satisfactory one. The prohibitive cost of a proper scheme in this parish was mentioned in my last report.

At Corsham, the High Level system was discharging an unsatisfactory effluent, confirmed by analysis. No pollution from the Low Level system was apparent.

At Lacock the effluent was reported as satisfactory, probably owing to dilution with storm water.

The attention of the Chippenham Rural District Council was called to the condition of the Corsham High Level Works, and it is understood that the Council is considering the more

efficient supervision of the installations at Box, Corsham, and Lacock, and propose to appoint a whole-time caretaker to work under the instructions of the Sanitary Inspector. This appointment should certainly tend to improve the condition of the sewage outfalls.

Cricklade and Wootton Bassett.—The three systems at Cricklade were visited, and effluent from that known as the “Forty Tanks” was found escaping from the irrigation area into the ditch leading into the River Thames. The analysis showed the effluent to be highly polluting, and the attention of the Rural District Council was accordingly called to the matter. A reply was received that steps would be taken to prevent a repetition of the cause of complaint.

The main outfall system and the small bacteriological installation for the new Council Houses were working satisfactorily at the time of the inspection.

For many years complaints have been made by the Thames Conservators of the pollution of a tributary of the Thames, the River Key, by drainage from the parish of Purton. As a result the District Council have prepared a scheme and a Ministry of Health inquiry was held on November 5th for the purpose of considering an application for consent to borrow £12,500 for works of sewerage and sewage disposal for the parish of Purton.

I attended this inquiry and drew attention to the large proportion of houses unserved by the scheme and to absence of provision for due supervision. The restricted water supply, in my opinion, would lead to difficulties and the neglected condition of the water works was an obvious example of what might be expected from sewage works if ample supervision was not provided.

The attention of the Ministry of Health has since been drawn to these points by the County Public Health Committee.

The works at Wootton Bassett continue to be well-managed, and the effluent gives a satisfactory result. No nuisance from whey waste from the local milk factory was reported during the year.

Devizes.—This small works, dealing with the sewage from a suburb of Devizes, appears sufficient for present needs, and gives a satisfactory effluent.

Highworth.—Both at the Eastrop and Westrop works of the Highworth system the sewage was being satisfactorily treated by absorption, and no pollution was found.

At Stratton St. Margaret the new works were found to be nearing completion at the time of inspection in June. The effluent from the secondary filter beds passes directly into a tributary of the Thames without final land treatment.

At Wroughton no pollution was found from the main works or from the upper small area used for land treatment. A sample of effluent taken from the main works proved to be of satisfactory quality. Certain small defects in the carrier system were pointed out to the Surveyor, who promised to rectify matters.

Melksham.—The river Avon below the Milk Factory at Staverton was found discoloured by milk wastes when inspected in August. Owing to the large volume of water in the river at the time, the signs of pollution disappeared further down the stream.

The matter was referred to the District Council for observations, and a reply received, enclosing a letter from the company concerned in the pollution, in which the latter stated that the condition of the river in this instance was due to the washing away of a screen of a temporary nature which had been erected to catch froth. The company now proposed to erect a more permanent screen, and hoped that all cause for complaint would thereby be removed.

Mere.—Samples of effluent from both the main and subsidiary works at Mere were found on analysis to be of good quality.

Pewsey.—I visited Netheravon in November, and discussed with the Deputy Assistant Director of Hygiene, South Tidworth, a proposal by the War Office to instal a sewerage system for a considerable number of new houses which the War Office proposed to build. The scheme suggested will consist of tanks and percolating filter, and the purified effluent will be discharged into the River Avon just below the intake of the R.A.F. water works.

No sewage disposal system exists for the village of Pewsey, and no sewers which can be regarded as such. The river is polluted by sewage discharged through old road drains.

There can be no doubt that better sanitary arrangements are required in this village, in view both of the pollution of the river and of the absence of any public method of removal of sewage matter. A closely populated village of this character cannot continue indefinitely under primitive sanitary conditions without eventually running grave risk to the public health.

Tisbury.—The analysis of the effluent from the Tisbury irrigation area gave a better result than had been the case for several years, but the sample was taken following several days very heavy rainfall, and cannot be regarded as representing the usual effluent in ordinary weather.

As stated in my last report the Rural District Council had promised to extend the irrigation area in order to rest a portion of the sewage-sick land which has been in use since 1908. At the time of inspection in June the proposed extension had not been carried out, but it was understood that work on this scheme would be undertaken later in the year.

At Hindon the conditions remained as described in my last report. The effluent was reported as a very bad one, but it does not appear to reach any watercourse.

WATER SUPPLY.

According to the records in my possession the average rainfall in the County for the year 1924 was 41.32 inches, compared with 34.79 in the preceding year. The figure is the highest since 1915, when 41.73 inches was recorded.

Although the rainfall was so much heavier, rain actually fell on 4 days less than in 1923, the number being 195 against 199. Very abnormal quantities of rain fell within short periods, sometimes within a few hours.

Too much reliance must not be placed on the statistics here given. The returns received did not cover all the various altitudes in the County, and it therefore follows that the mean cannot be an accurate one.

A Ministry of Health inquiry was held at Westbury on the 4th January, when the Urban and Rural District Councils sought sanction to borrow £4,550 to enable them to increase their water supply. The necessity arose in consequence of the growth of Westbury and various outlying areas, such as Dilton Marsh and Westbury Leigh, the recent provision of a proper

sewage system, and the partial exhaustion at times of the existing supply. I understand that the Minister has sanctioned an expenditure of £1,700 in order that preliminary work may be commenced. When a well has been sunk, the Minister will consider the possibility of sanctioning a further amount, having regard to the quality of the water obtained.

An Inspector of the Ministry also visited the Malmesbury and Cricklade and Wootton Bassett Rural Districts early in May to enquire into the water supply of the areas. Assistance was rendered by my Department, but I am not aware of any results.

FOOD AND DRUGS.

Neither the Sale of Food and Drugs Acts, the Milk and Cream Regulations, 1912-17, the Dairies, Cowsheds and Milkshops Orders, the Milk (Special Designations) Order, or the Condensed and Dried Milk Regulations, are administered by the County Public Health Department, but, as it is suggested that a statement of the action taken during the year under these heads should be included in this report, I have obtained the following information in respect of certain of the items from the Departments concerned.

SALE OF FOOD AND DRUGS ACTS.—The following summary shows the nature of the samples submitted for analysis, as well as the number of samples found adulterated or unsatisfactory.

Substances.					Number Analysed.	Number Adulterated or Unsatis- factory.
Baking Powder	...	...	...	...	1	—
Beef Dripping ...	...	...	...	...	1	—
Beef Sausages ...	...	...	...	...	2	—
Brandy ...	...	...	...	...	1	—
Cheese ...	...	...	...	...	1	—
Cocoa ...	...	...	...	...	1	—
Cream ...	...	...	...	...	8	1
Cream Preserved	...	...	...	...	2	—
Cream of Tartar	...	...	...	...	2	—
Custard Powder	...	...	...	...	1	—
Epsom Salts ...	...	...	...	...	1	—
Honey ...	...	...	...	...	1	—
Lard ...	...	...	...	...	1	—
Margarine ...	...	...	...	...	2	—
Milk ...	...	...	...	...	179	10
Mincemeat ...	...	...	...	...	4	1
Pork Sausages	...	...	...	...	3	—
Self-Raising Flour	...	...	...	...	2	—
Sponge Cake ...	...	...	...	...	1	—
Tartaric Acid ...	...	...	...	...	1	—
Whisky ...	...	...	...	...	13	2
						<hr/>
						228
						<hr/>
						14

Prosecutions were instituted in 8 instances of unsatisfactory samples, 6 of milk, 1 of cream and 1 of whisky. In the remaining four cases of adulterated milk, and that of unsatisfactory mincemeat, the vendors were cautioned, but no action was taken regarding the second sample of unsatisfactory whisky.

Of the eight cases in which it was decided to institute prosecutions, substantial fines were inflicted in five instances, whilst one was dismissed, and the remaining two were pending at the end of the year.

MILK AND CREAM REGULATIONS, 1912-17.—The work under the Public Health (Milk and Cream) Regulations, 1912-1917, accomplished during the year was as follows :—

Milk and Cream not sold as Preserved Cream—

	Number of Samples examined for the presence of a preservative				Number in which a preservative was reported to be present.
Milk	173	Nil.
Cream	10	1 (contained 0.3% boric acid)

Cream sold as Preserved Cream—

Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct :—

Correct statements made	...	...	...	...	2
Statements incorrect	...	...	...	.....	Nil.

Determinations made of milk fat in cream sold as preserved cream :—

Above 35 per cent.	...	...	...	...	2
Below 35 per cent.	...	...	...	...	Nil.

The Dairies, Cowsheds, and Milkshops Orders are administered by the local Sanitary Authorities and information should be included in the District Medical Officers' Annual Reports.

One licence in respect of the production of Grade A milk was issued by the County Council under the Milk (Special Designations) Order.

The Inspectors of Weights and Measures state that no action was taken in connection with the Condensed and Dried Milk Regulations.

8. PUBLIC HEALTH STAFF.

A list of the staff of the County Public Health Department, other than Medical Officers of the Venereal Clinics and the clerical staff, is given in my current Annual Report as School Medical Officer, and need not be repeated here. It consists of six whole-time and seven part-time Medical Officers (six of whom are specialists in ophthalmic, venereal, and mental work), three whole-time Dentists, an Inspector under the Mental Deficiency Act, twelve whole-time

Nurses, in addition to nearly eighty District Nurses who act as part-time Health Visitors and School Nurses. From April, 1925, an additional part-time specialist and a practically full-time After-Care Sister will be engaged in orthopaedic work.

The duties of the staff are co-ordinated, and the majority undertake work in connection with both school medical inspection and public health. All appointments of the staff are made by the Public Health Committee.

A salary contribution from either the Ministry of Health, Board of Education, or Board of Control, is received in respect of practically every officer.

MENTAL DEFICIENCY ACT, 1913.

Dr. Monnington as part-time Mental Expert was called in to assist in the diagnosis of 31 cases of particular importance. This is a slight increase on the number for the previous year, but less than in 1921 and 1922, as the following table shows:—

	1924	1923	1922	1921
(a) Cases brought before Courts of Summary Jurisdiction referred by the Magistrates for examination as to mental condition	8	6	8	3
(b) Cases under or above school age upon which a Specialist's report was desired by the County Mental Deficiency Committee	13	4	18	18
(c) Cases of school age upon which a Specialist's report was desirable	10	14	6	37
	—	—	—	—
	31	24	32	58
	—	—	—	—

9. HOUSING.

I append a table compiled from returns received from the various Sanitary Inspectors, showing the action taken in the Urban and Rural Districts of the County in connection with the administration of the Housing Acts. Owing to the death and resignation, respectively, of two Inspectors, the returns for the Devizes and Warminster Urban Districts are not available. It will be observed that between 700 and 800 new houses were erected during the year, which is a considerable increase on the number for 1923. Most of these houses were erected by building societies and private persons on the terms of the Government subsidy, very few being built by the Local Authorities. The shortage of houses in Wiltshire is still acute, as in all parts of the country.

From the returns it would appear that slightly less than twenty Closing Orders were issued during the year in respect of property which was unfit for human habitation. In this connection it may be mentioned that copies of only five such Orders were received by the County Council, although it is a statutory obligation on the part of the District Councils to furnish copies of these representations.

Very little inspection of existing houses was carried out by the Inspectors, and few steps appear to have been taken to effect necessary improvements to such property. The improvement of insanitary dwellings and the closing of unfit houses still present difficulties which too often lead to postponement to a more convenient season. It is true that, where owners refuse to undertake repairs, the Local Sanitary Authority can undertake the work and charge the owners for the same, but this provision is practically never used. The general question as it applied to Trowbridge was debated at some length by the County Public Health Committee in July, and a deputation from the Urban District Council attended, and explained the very real interest the Council was taking in the matter and the prospect of early action as a result of their efforts.

Old buildings which have degenerated into slums present a sufficiently serious problem without the prospect of new buildings being erected, which, owing to their site, structure, or other features are bound to entail unhealthy conditions. In all the Urban Districts and in fifteen of the nineteen Rural Districts of the County, building bye-laws are in force which provide means of controlling the erection of new buildings in the interests of health. In four Rural Districts no such bye-laws exist, and of these the Bradford-on-Avon Rural District is conspicuous for the activity of building operations quite uncontrolled by the Local Sanitary Authority.

URBAN DISTRICTS.

	Bradford-on-Avon.	Calne.	Chippenham.	Devizes.	Malmesbury.	Marlborough.	Melksham.	Salisbury.	Swindon.	Trowbridge.	Warminster.	Westbury.	Wilton.	Total.
Number of new houses erected during the year :—														
(a) Total	19	4	20	—	—	18	6	39	299	11	—	20	—	436
(b) With State assistance under the Housing Acts, 1919, 1923, or 1924.														
(i) By the Local Authority ..	12	—	—	—	—	7	—	28	—	—	—	—	—	47
(ii) By other bodies or persons ..	7	3	20	—	—	11	—	11	222	11	—	10	—	295
1. Unfit Dwelling Houses.														
Inspection—(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	220	76	215	—	30	248	22	576	569	162	—	79	10	2207
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	97	76	—	—	22	108	—	270	384	20	—	74	6	1057
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	—	2	—	—	—	28	—	2	—	5	—	1	—	38
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	45	—	28	—	1	44	17	—	552	142	—	5	6	840
2. Remedy of Defects without service of formal Notices.														
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	34	14	24	—	14	21	11	—	179	39	—	5	6	347
3. Action under Statutory Powers.														
A. Proceedings under Section 28 of the Housing, Town Planning, etc., Act, 1919.														
(1) Number of dwelling houses in respect of which notices were served requiring repairs	5	56	5	Return Not Received	3	25	—	—	—	57	Return Not Received	1	—	152
(2) Number of dwelling-houses which were rendered fit after service of formal notices—														
(a) by owners	5	14	5		1	7	—	—	—	5		1	—	38
(b) by Local Authority in default of owners	—	—	—		—	—	—	—	—	—		—	—	—
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	—	—	—		—	3	—	—	—	—		—	—	3
B. Proceedings under Public Health Acts.														
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied.. .. .	28	36	24		—	33	—	306	3	78		—	—	508
(2) Number of dwelling-houses in which defects were remedied after service of formal notices—														
(a) by owners	—	36	5		—	33	—	299	3	12		—	—	388
(b) by Local Authority in default of owners	—	—	—		—	—	—	—	—	—		—	—	—
C. Proceedings under Sections 17 and 18 of the Housing, Town Planning, etc., Act, 1909														
(1) Number of representations made with a view to the making of Closing Orders.	—	—	—		—	—	—	2	—	5		—	—	7
(2) Number of dwelling-houses in respect of which Closing Orders were made ..	—	—	—		—	—	—	2	—	5		—	—	7
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	—	—	—		—	—	—	—	—	—		—	—	—
(4) Number of dwelling-houses in respect of which Demolition orders were made	—	—	—		—	—	—	—	—	—		—	—	—
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	—	—	—		—	—	—	—	—	—		—	—	—

RURAL DISTRICTS.

Amesbury.	Bradford-on-Avon.	Calne.	Chippenham.	Cricklade and Wootton Bassett.	Devizes.	Highworth.	Malmesbury.	Marlborough.	Melksham.	Mere.	Pewsey.	Ramsbury.	Salisbury.	Tetbury.	Tisbury.	Warminster.	Westbury and Whorwellsdown.	Wilton.	Total.	Administrative County.
13	12	7	15	15	23	118	2	2	11	2	58	3	28		5	3	8	17	342	778
—	—	—	—	—	—	8	—	1	—	—	—	—	—		—	—	3	—	12	59
4	12	7	11	11	10	101	—	—	10	—	—	3	12		5	2	—	11	199	494
113	72	31	220	154	41	1117	53	240	15	41	32	125	27		125	91	95	130	2722	4929
42	—	31	27	6	21	930	25	173	—	41	—	—	4		—	33	35	21	1389	2446
—	4	—	—	—	1	4	—	7	—	1	1	6	—		4	7	1	2	38	76
29	15	—	220	33	28	178	1	15	8	17	2	33	—		75	21	17	10	702	1542
25	8	25	—	33	34	145	15	17	7	17	60	31	23	Return Not Received	36	19	28	10	533	880
—	—	—	—	—	4	—	4	1	—	1	—	10	—		—	9	12	2	43	195
—	6	—	—	—	—	—	—	—	—	—	—	7	—		—	11	11	—	35	73
—	—	—	—	—	4	—	—	—	—	—	—	—	—		—	—	—	—	4	4
—	—	—	—	—	—	—	—	—	—	1	—	3	—		—	—	—	2	6	9
—	—	—	220	—	3	18	19	—	—	—	—	—	—		—	37	7	25	329	837
—	—	—	29	—	3	18	10	—	—	—	—	—	—		—	33	7	22	122	510
—	—	—	—	—	—	—	—	—	—	—	—	—	—		—	—	—	—	—	—
—	—	—	—	—	—	4	—	—	—	—	1	—	—		—	—	—	—	5	12
—	—	—	2	—	—	4	—	1	—	—	1	—	—		—	1	1	—	10	17
—	—	—	—	—	—	—	—	—	—	—	—	—	—		—	1	—	—	1	1
—	—	—	2	—	—	—	—	—	—	—	—	—	—		—	—	—	—	2	2
—	—	—	2	—	—	—	—	—	—	—	—	—	—		—	—	—	—	2	2

